

9/26/01
1064 U.S. PTO9-27-01
A1008

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. HO-P02301US0

First Inventor Cam Reed, Jr.

Title GUTTER SWEEP

Express Mail Label No. EK102725190US

APPLICATION ELEMENTS		ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231																												
See MPEP chapter 600 concerning utility patent application contents																														
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 8]		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies																												
ACCOMPANYING APPLICATIONS PARTS <table border="0"> <tr> <td>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</td> <td>10. <input type="checkbox"/> 37 CFR 373(b) Statement <input checked="" type="checkbox"/> Power of Attorney</td> </tr> <tr> <td>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></td> <td>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</td> </tr> <tr> <td>13. <input type="checkbox"/> Preliminary Amendment</td> <td>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></td> </tr> <tr> <td>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></td> <td>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</td> </tr> <tr> <td colspan="2">17. <input type="checkbox"/> Other: _____</td> </tr> </table>				9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	10. <input type="checkbox"/> 37 CFR 373(b) Statement <input checked="" type="checkbox"/> Power of Attorney	11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	13. <input type="checkbox"/> Preliminary Amendment	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	17. <input type="checkbox"/> Other: _____																		
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76 <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No : _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.																														
19. CORRESPONDENCE ADDRESS <table border="0"> <tr> <td><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td> <td>26,271</td> <td>or <input type="checkbox"/> Correspondence address below</td> </tr> <tr> <td>Name</td> <td colspan="2"></td> </tr> <tr> <td>Address</td> <td colspan="2"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> </tr> <tr> <td>Name (Print/Type)</td> <td colspan="2">Edward D. Steakley</td> </tr> <tr> <td>Signature</td> <td colspan="2"><i>Edward D. Steakley</i></td> </tr> <tr> <td></td> <td>Date</td> <td>47,964</td> </tr> <tr> <td></td> <td colspan="2">Sept. 26, 2001</td> </tr> </table>				<input checked="" type="checkbox"/> Customer Number or Bar Code Label	26,271	or <input type="checkbox"/> Correspondence address below	Name			Address			City	State	Zip Code	Country	Telephone	Fax	Name (Print/Type)	Edward D. Steakley		Signature	<i>Edward D. Steakley</i>			Date	47,964		Sept. 26, 2001	
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	Date	47,964																												
	Sept. 26, 2001																													

Transmittal-New Utility Patent Application

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EK102725190US, in an envelope addressed to: Box Patent Application, Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: **9/26/01**Signature: *Elena Maglito*

(Elena Maglito)

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 355.00)

Complete if Known

Application Number	Not Yet Assigned
Filing Date	
First Named Inventor	Cam Reed, Jr.
Examiner Name	Not Yet Assigned
Group Art Unit	N/A

Attorney Docket No. HO-P02301US0

METHOD OF PAYMENT

FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 06-2375

Deposit Account Name Fulbright & Jaworski L.L.P.

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	355.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)		(\$)		355.00	

2. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid
Total Claims	10	-20** =	<input type="text"/> X <input type="text"/>	= 0.00
Independent Claims	3	-3** =	<input type="text"/> X <input type="text"/>	= 0.00
Multiple Dependent			<input type="text"/>	= 0.00

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$)		0.00	

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

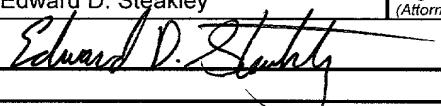
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
105	130	205	65
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139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00)

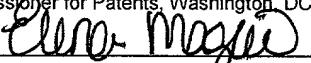
SUBMITTED BY

Complete (if applicable)

Name (print/type)	Edward D. Steakley	Registration No. (Attorney/Agent)	47,964	Telephone	(713) 651-5423
Signature				Date	Sept. 26, 2001

Fee Transmittal

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